FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

`12FE4M5`

SUPPORT AND DEFEND PAC

ADDRESS (number and street) ▼

P.O. BOX 576

☐ Check if different than previously reported. (ACC)

HAVERTOWN

PA 19083-

CITY ▲ **STATE ▲** **ZIP CODE ▲**

2. FEC IDENTIFICATION NUMBER ▼

C 0 0 5 5 2 5 2 1

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- ☐ Primary (12P)
- ☐ Convention (12C)
- ☐ General (12G)
- ☐ Special (12S)
- ☐ Runoff (12R)

Election on M M / D D / Y Y Y Y in the State of ☐

(d) 30-Day POST-Election Report for the:

- ☒ General (30G)
- ☐ Runoff (30R)
- ☐ Special (30S)

Election on 1 1 / 0 4 / 2 0 1 4 in the State of ☐

5. Covering Period 1 0 / 0 1 / 2 0 1 4 through 1 1 / 1 6 / 2 0 1 4

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Grant Moody

Signature of Treasurer _(signed)_ Date 1 2 / 0 3 / 2 0 1 4

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									**FEC FORM 3X** Rev. 12/2004

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